

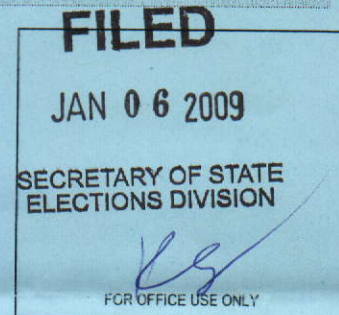
CAMPAIGN CONTRIBUTIONS AND EXPENSES REPORT

State of Nevada

Name (print) Celana Wasson Office (if applicable) _____ District (if applicable) A
4311 Reggare Rd. Mailing Address (include city and zip code) _____ Telephone No. 826-5776
numatao@aol.com E-Mail Address _____

Select Appropriate Box(es) ☒ CANDIDATE ☐ PAC ☐ POL PRTY ☐ IND EXP ☐ NONPROFIT CORP
☐ LEGAL DEFENSE FUND ☐ AMENDED

- ☐ Annual Filing - Due January 15, 2008
 Period: January 1, 2007 - December 31, 2007
- ☐ Report #1 - Due August 5, 2008*
 Period: Jan. 1, 2008 - July 31, 2008
- ☐ Report #2 Due - October 28, 2008*
 Period: Aug. 1, 2008 - Oct. 23, 2008
- ☒ Report #3 Due - January 15, 2009**
 Period: Oct. 24, 2008 - Dec. 31, 2008
- ☐ Annual Filing - Due January 15, 2009
 Period: January 1, 2008 - December 31, 2008



* These Reports are filed by incumbents/candidates running for office in the 2008 election cycle
 ** Third Report suffices for 2009 Annual Filing if candidate also filed Report Nos. 1 and 2

CONTRIBUTIONS SUMMARY

	This Period	Cumulative From Beginning of Report Period #1 through End of This Reporting Period
1. Total Monetary Contributions Received in Excess of \$100 (See page 1 of instruction sheet)	250.	6495
2. Total Monetary Contributions Received of \$100 or Less (See page 2 of instruction sheet)	100.	549
3. Total Monetary Contributions in the form of loans guaranteed by a third party. (See page 2 of instruction sheet)		
4. Total Monetary Contributions in the form of loans that were forgiven (See page 2 of instruction sheet)	400	400
5. Total Amount of Monetary Contributions Received (Add Lines 1 through 4) (See page 2 of instruction sheet)	350.	7044
6. Total Amount of Written Commitments for Contributions (When commitment is funded, report as contribution (monetary or in kind)) (See page 2 of instruction sheet)		
7. Total Value of In Kind Contributions Received in Excess of \$100 (See page 2 of instruction sheet)		

EXPENSES SUMMARY

8. Total Monetary Expenses Paid in Excess of \$100 (See page 2 of instruction sheet)	174.71	5,054.15
9. Total Monetary Expenses Paid of \$100 or Less (See page 2 of instruction sheet)	608.07	2,997.45
10. Total Amount of All Monetary Expenses Paid (Add Lines 8 and 9) (See page 2 of instruction sheet)	782.78	8,051.60
11. Total Value of In Kind Expenses in Excess of \$100 (See page 3 of instruction sheet)		
12. Disposition of Unspent Contributions (Only reported on Report #3, Annual Report or 15th day of the second month after candidates defeat or incumbent does not run for reelection) (See page 3 of instruction sheet)	\$345.00 Loan - personal 945. Repayment 400.00 forgiven	

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Celana Wasson
 Signature

1-4-09
 Date

Report Period #3

A
District (if applicable)

[illegible]

PAGE 2 OF 6

Report Period	#
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District (if applicable)

Transfer Total Amount of All Written Commitments to Line 6 of Contributions Summary

[illegible]

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CAMPAIGN EXPENSES

Report Period #3

Name (print) Celana Wasson Office (if applicable) Less District (if applicable) A

Expenses in Excess of \$100

Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
Claim Jumper 4405 S. Virginia Reno, NV 89502		10/05/08	33.77
Olive Garden 4400 S. Virginia Reno, NV 89502	1	10/08/08	32.
Bertha Mirandas 336 Mill St Reno, NV 89512		10/13/08	64.10
Murrietas Cantina 4385 Neil Rd. Reno, NV 89502		10/21	52.53
Nevada Resort 10 Hardy Dr. Sparks, NV		10/29	22.35
7-11 GAS 4497 Longley		11-3-08	45.00
Marie Callenders 6365 S. McCarraw Reno, NV		11-3-08	25.18
J.S. Pie 555 W 5th St Reno, NV		11-8-08	43.25
Quick Stop GAS Reno 89502		11-5-08	36.00
Kinkos		10-07	22.54
Callie Wasson 4311 Reggie Reno, NV 89502		10/31	80.00
Jim Wasson 4311 Reggie Reno		11/1	40.

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CAMPAIGN EXPENSES

Report Period # 3

Gelana Wasson

Name (print)

Office (if applicable)

District (if applicable)

Expenses in Excess of \$100

Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
7-11 GAS		11/4	45.
Kinkos Virginia St.		11/5	22.35
7-11 GAS		11/10	50.
			608.07

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